## **APPLICATION DATA SHEET**

## **Application Information**

Application Number:: New

Filing Date:: 02/26/04

Application Type:: Regular

Subject Matter:: Utility

Suggested Classification:: None

Suggested Group Art Unit:: None

CD-ROM or CD-R?:: None

Sequence Submission:: None

Computer Readable Form (CRF)?:: No

Title:: FRESH WATER EXTRACTION DEVICE

Attorney Docket Number:: CHC 3003

Request for Early Publication?:: No

Suggested Drawing Figure:: None

Total Drawing Sheets:: 4

Small Entity?:: Yes

Petition Included?:: No

Licensed US Govt. Agency:: None

**Applicant Information** 

Applicant Authority Type:: Inventor

Primary Citizenship Country:: United States of America

Status:: Full Capacity

Given Name:: John

Middle Name:: P.

Family Name:: Craven

Name Suffix::

City of Residence:: Honolulu

State or Province of Residence::

Country of Residence:: United States of America

	•			
Street Mailing Address::		4921 Waa Street		
City of Mailing Address::		Honolulu		
State or Province of Mailing Address::		Hawaii		
Country of Mailing Address::		United States of America		
Postal or Zip Code of Mailing Address::		96821		
Correspondence Info	rmation			
Correspondence Customer Number::		30868		
Name::		Arlir M. Amado		
Street of Mailing Address::		Kramer & Amado, P.C.		
		2001 Jefferson Davis Highway		
•		Suite 1101		
City of Mailing Address::		Arlington		
State or Province of Mailing Address::		VA		
Country of Mailing Address::		US		
Postal or Zip Code of Mailing Address::		22202		
Phone Number::		703-413-5000		
Fax Number::		703-413-5048		
E-mail address::		arlir@kramerip.com		
Representative Inform	nation			
Representative Customer Number::		30868		
Domestic Priority Info	ormation			
Application::	cation:: Continuity Type		Parent Application::	Parent Filing Date::
Famaiana Dulanita a la fama				
Foreign Priority Infor	Application number::		Filing Date::	Priority Claimed::
Country::	Application num	יחבויי	i iiiig Date	r nonly Claimed

## **Assignee Information**

Assignee Name:: COMMON HERITAGE CORPORATION

Street of Mailing Address:: 1750 Kalakaua Avenue

City of Mailing Address:: Honolulu

State or Province of Mailing Address:: HI

Country of Mailing Address:: United States of America

Postal or Zip Code of Mailing Address:: 96740